

S/015/0077

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SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <u>K Howell</u> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
		B. Received by (Printed Name)	C. Date of Delivery <u>11/23</u>
<p>1. Article Addressed to:</p> <p>Daniel Sheppard Gold Terra, Inc. P O Box 783 Price Utah 84501</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7005 2570 0000 4801 6645</p>	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7005 2570 0000 4801 6645

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	LETTER DATED 11/18/2009
Certified Fee	DEFICIENT AMENDED NOI
Return Receipt Fee (Endorsement Required)	DANIEL SHEPPARD
Restricted Delivery Fee (Endorsement Required)	BLUE CASTLE S/017/0077
Total Postage & Fees	\$
<p>Daniel Sheppard P O Box 783 Price Utah 84501</p>	
PS Form 3800, June 2002 See Reverse for Instructions	

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